

AUG 19 2005

**MOTOROLA**

FAX TRANSMITTAL SHEET

Motorola, Inc.
Law Department
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5

Number of Pages (including this page)

Date: August 19, 2005
To: Examiner Cao, Huedung X - Art Unit 2821
Location: United States Patent and Trademark Office
Fax No.: (571) 273-8300 Centralized Facsimile Number
From: Larry G. Brown REG. NO. 45,834
Subject: Serial No.: 10/649,985 Docket No.: CE11376JAN

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MESSAGE:

Enclosed herewith for filing in the above-identified application, please find:

- Transmittal Form;
- Fee Transmittal (in duplicate);
- Notice of Appeal.

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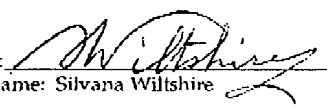
AUG 22 2005

EXAMINER:	Cao, Huedung X
ART UNIT:	2821
APPLICATION SERIAL NO.:	10/649,985
FILE DATE:	August 26, 2003
INVENTORS:	Demicco, et al.

CERTIFICATE OF FAX TRANSMITTAL

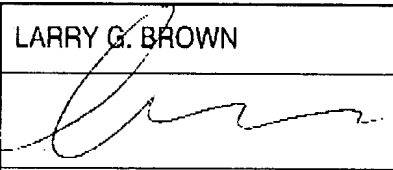
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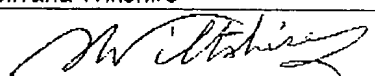
Date: August 19, 2005

Signature: 
Printed Name: Silvana Willshire

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/649,985	
		Filing Date	August 26, 2003	
		First Named Inventor	Adam M. Demicco	
		Group Art Unit	2821	
		Examiner Name	Cao, Huedung X	
Total Number of Pages in this Submission		4	Attorney Docket Number	CE11376JAN

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts <input type="checkbox"/> Interview Summary
Remarks <input type="text"/>		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	LARRY G. BROWN	Registration No.	45,834
Signature			
Date	August 19, 2005		

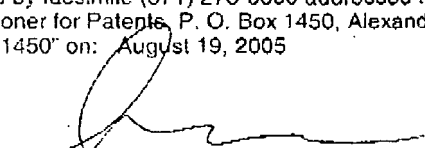
CERTIFICATE OF TRANSMITTAL/MAILING/FAX			
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Typed or printed name	Silvana Wiltshire		
Signature			Date
			August 19, 2005

FEE TRANSMITTAL		Complete If Known	
Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/649,985
		Filing Date	August 26, 2003
		First Named Inventor	Adam M. Demicco
		Examiner Name	Cao, Huedung X
		Group Art Unit	2821
		Attorney Docket No.	CE11376JAN
TOTAL AMOUNT OF PAYMENT (\$)		500.00	

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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number <u>502117</u> Deposit Account Name <u>Motorola, Inc.</u> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.	<h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>430</td><td>2252</td><td>215</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>980</td><td>2253</td><td>490</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1530</td><td>2254</td><td>765</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2080</td><td>2255</td><td>1040</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>340</td><td>2401</td><td>170</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>340</td><td>2402</td><td>170</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>300</td><td>2403</td><td>150</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number CE11376JAN
I hereby certify that this correspondence is being transmitted by facsimile (571) 273-8300 addressed to "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450" on: August 19, 2005 Signature  Typed or printed name <u>Larry G. Brown</u>	In re Application of <u>Demicco, et al.</u>	
	Application Number <u>10/649,985</u>	
	Filed <u>August 26, 2003</u>	
	For <u>DETACHABLE ANTENNA MODULE</u>	
	Art Group <u>2821</u>	
	Examiner <u>Cao, Huedung X</u>	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.00</u> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a Fee Transmittal in duplicate. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any over payment to Deposit Account Number <u>502117</u> . I have enclosed a Fee Transmittal in duplicate. <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>45,834</u> <input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____ NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. <input checked="" type="checkbox"/> * Total of <u>1</u> forms are submitted.		

This collection of information is required by 37 CFR 1.91. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

08/22/2005 JBALINAN 00000026 502117 10649985

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